
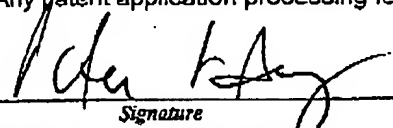


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CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)			Docket No. 1549.004
Applicant(s): Bauder			
Serial No. 10/030,328	Filing Date 11/9/01	Examiner Goetz	Group Art Unit 3725
Invention: METHOD FOR PRODUCING A STRIP LIKE PRE-MATERIAL.....			
RECEIVED CENTRAL FAX CENTER NOV 12 2003			
OFFICIAL			
I hereby certify that this <u>Amend transmittal w/auth to chg and Amendment</u> (Identify type of correspondence)			
is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>(703) 872-9302</u>)			
on <u>November 12, 2003</u> (Date)			
<u>Wanda Ruggiera</u> (Typed or Printed Name of Person Signing Certificate)			
<u></u> (Signature)			
Note: Each paper must have its own certificate of mailing.			

P18/REV01

AMENDMENT TRANSMITTAL LETTER (Small Entity)				Docket No. 1549.004							
Applicant(s): Bauder											
Serial No. 10/030,328	Filing Date 11/9/01	Examiner Goetz		Group Art Unit 3725							
Invention: METHOD FOR PRODUCING A STRIP LIKE PRE-MATERIAL....											
<u>TO THE COMMISSIONER FOR PATENTS:</u>											
Transmitted herewith is an amendment in the above-identified application.											
<input checked="" type="checkbox"/> Small Entity status of this application has been established under 37 CFR 1.27 by a verified statement previously submitted.											
<input type="checkbox"/> A verified statement to establish Small Entity status under 37 FR 1.27 is enclosed.											
The fee has been calculated and is transmitted as shown below.											
CLAIMS AS AMENDED											
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE						
TOTAL CLAIMS	72 -	88 =	0 x	\$9.00	\$0.00						
INDEP. CLAIMS	4 -	4 =	0 x	\$42.00	\$0.00						
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00						
<input checked="" type="checkbox"/> No additional fee is required for amendment.											
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____											
<input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.											
<input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 02-2105											
<input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.											
<input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.											
 Signature			Dated: November 12, 2003								
Peter L. Berger, Esq. Reg. No. 24,570 Levisohn, Berger & Langsam, LLP 805 Third Avenue, 19th Floor New York, New York 10022 Phone (212) 486-7272 Fax (212) 486-0323 Customer Number 04617											
CC:											
						I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.					
						Signature of Person Mailing Correspondence					
Typed or Printed Name of Person Mailing Correspondence											

P11SMALL/REV08